

The Impact of Housing Quality on Public Health

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ABSTRACT

Housing quality significantly impacts public health, influencing both physical and mental well-being. This paper examines how inadequate housing, particularly in terms of structural integrity and environmental conditions, contributes to adverse health outcomes. The analysis investigates the intersection of socioeconomic status and housing conditions, revealing that poorer communities experience disproportionate health risks due to substandard living conditions. Key health issues include respiratory illnesses, mental health disorders, and chronic diseases exacerbated by dampness, mold, and overcrowding. This paper also discusses interventions, policies, and case studies that have successfully improved housing quality, ultimately benefiting public health. A call for interdisciplinary collaboration to address these systemic challenges is made, highlighting the importance of integrating urban planning, social policies, and public health strategies.

Keywords: Housing quality, Public health, Socioeconomic disparities, Respiratory illnesses, Mental health.

INTRODUCTION

Housing quality is a recognized social determinant of public health and a fundamental topic of discussion both in the public sector and at the academic level. Measurable health outcomes include both chronic illness and injury from unsafe living environment hazards, as well as mental health conditions caused by living in conditions associated with poverty. Housing quality is a multifaceted concept that can incorporate structural integrity, safety, environmental conditions, affordability, location, and the social significance of the home to its occupants, among other variables. This paper focuses narrowly on structural quality and environmental conditions respectively. It calls for an interdisciplinary, multi-scale approach to solve the complex issues of housing quality [1, 2]. Poor housing quality is directly linked with adverse health outcomes, poverty, and low socioeconomic status. Socioeconomic status is largely predictive of chosen residential conditions, with the very poorest likely to suffer the worst health risk factors from inappropriate or poor accommodation. There has been a historic disparity between housing and health outcomes for minority and low-income populations in developed countries. As of 2017, approximately 30% of the European Union still live below the monetary poverty threshold. United States households are categorized as "rent-burdened" if they pay more than 35% of their income on rent. A 2017 analysis estimated that 38% of American households were rent-burdened. California, while illegal, reportedly had the highest levels of rental unaffordability, effectively a "crisis." However, the housing crisis projects itself across income levels, with a study in the US stating in 2018 that half of all children, families, individuals, and Millennials aged 18-35 experienced the stress of paying at least 30% of their income on rent, regardless of income [3, 1].

FACTORS INFLUENCING HOUSING QUALITY

Quality housing is a complex multidimensional concept, and as such, it has economic, environmental, and social dimensions as well. Thus, its construction and maintenance are dependent on various circumstances, primarily related to the income level of the housing occupant. Resources are also a factor, and practical solutions depend on whether sound urban development principles are implemented. Establishing a sound standard or norm for the provision of housing is difficult due to the artificial boundaries that intersect and allow for inertia [4, 5]. Legislation and regulations often provide for an

expensive provision and maintenance level of housing that implies social or political problems. Finally, through a process called housing discrimination, it has been made clear that concern for community image is a further factor to consider. The influence that these aspects have on detecting the quality of housing has strong implications that require interventions and laws in fields such as architecture and planning, economics, social studies, the environment, and, today, public health. In addition, global political and economic trends are beginning to affect housing. Advances in communication and transportation technologies, together with an increase in the demand for foreign labor, have increased the mobility of the labor force [1, 6]. The quality of real estate depends on various factors, such as the quality of the buildings themselves, planning, products, environment, neighborhood relations, services, and more. In this perspective, a good address can be both a helping hand and a liability. Quality of real estate furthermore involves the care and use of real estate, its effective functioning, and the creation of a great society. Preventive interventions are mainly shaped by social medical thinking. Applying and discussing these insights can help in strategic thinking focused on health and positive family and societal outcomes [7, 8].

Health Impacts of Poor Housing Quality

Living in inadequate housing may directly or indirectly impact health in different ways. Dampness, mold, inadequate insulation of homes, and overcrowding are risk factors for poor health. Evidence shows that exposure to these poor housing conditions is associated with reductions in respiratory health and lung function, as well as increasing the risk of acute respiratory infections and asthma. Additionally, poor quality homes with limited thermal comfort can contribute to a number of other health and mental health conditions, including increasing the risk for cardiovascular diseases and promoting mental health conditions. Other research has shown the harmful effects that fuel poverty can have on the mental health of children and older home dwellers [9, 10]. Living in bad housing not only affects health but can also contribute to social isolation, hinder opportunities for education and work, and reduce the likelihood of community participation, all vital assets for good health. Moreover, disadvantaged members of society experience poor housing conditions disproportionately. For example, children living in poor quality housing are more likely to suffer from health conditions such as diarrhea and chest infections, with a higher likelihood of having substantial emotional or behavioral problems. In New Zealand, certain groups are over-represented among high-risk cases of respiratory diseases. A significant percentage of certain populations live in rental dwellings with one or more problems affecting the health of household members, compared to a lower percentage of total private renters. Around a notable percentage of people living with a disability in Scotland live in damp homes. Throughout Europe, more women with one or more children, older women living alone, unmarried men, and women of certain origins live in wholly inadequate quality housing. Certain female pensioners working in some of the most poorly paid jobs are also more likely to be living in poor-quality housing. The cost of healthcare is increased for those living in poor homes. A national pediatric homecare program estimated that a home consultation service saved a significant amount on hospital admissions in a given year. Long-term conditions are also generally more expensive for health systems to manage [11, 12].

Interventions And Policies to Improve Housing Quality and Public Health

Efforts to improve public health by upgrading the quality of housing that low-income families can afford can take several forms. Government policies, standards, and regulations have been the most common strategies for influencing the behavior of landlords and the quality of housing they provide. In recent years, promoting healthy housing activity has emerged at the community level as well. Enforcement of laws and building codes at the local level has been shown to improve housing safety. At the national level, standards and requirements for federally assisted housing have improved the safety and structural integrity of these buildings. Incentives for property owners to provide or upgrade housing are another policy approach; examples include tax credits and low-interest housing loans [13, 14]. Efforts at the federal, state, and local levels show that it is possible to improve housing and public health by intervening in the housing market. Enforcing housing codes and building laws to improve housing conditions has led to safer and higher-quality housing. Policies that try to incentivize the upgrading of housing are based on the assumption that landlords will make these changes in return for the incentives they receive. Many programs try to break down the financing and cost barriers associated with building and upgrading healthier housing. One approach allows landlords an income tax credit to cover some of the costs associated with building healthier housing. The federal government has also lent money at low interest to states to help finance low-income housing. Instead of or in addition to financial assistance, some programs have offered training and technical assistance to help landlords improve their housing. Market-based policies use the power of the free market to help create healthier housing. For example, one related program offers tenants loan insurance and loan guarantees so that they can make housing improvements.

In return for this assistance, the landlord must make and agree to keep the housing safe, clean, and in good condition for 20 years. Some programs offer long-term savings in energy costs if the housing is built according to healthier standards. Finally, laws that allow tenants to seek legal action against landlords who provide or refuse healthy housing for the family can put pressure on landlords and motivate them to make changes. A few housing-health studies have been designed to understand how to improve the health and housing of low-income renters. Results from these studies have provided new information on effective methods for preventing and reducing disease and promoting health [15, 16].

Case Studies and Best Practices

During the stakeholder review, the research team received a number of case studies exemplifying best practices in the improvement of housing quality and the impacts on public health outcomes in rural, urban, rental, and home ownership scenarios. In the following pages, these case studies are described in brief detail, followed by an assessment of key successes of each program, an evaluation of the challenges these programs face, a description of the outcomes of the programs, and the extent to which the program has contributed to residents' decisions to make environmentally healthy choices in the home, with the goals of influencing building and design decision-makers, as well as individual renters and homeowners. Then, common themes from the case studies and further commentary are provided, synthesizing the experiences of these programs and suggesting possible next steps. St. Louis Park has been a hands-on working participant in the production of healthy housing by leading by example with its residential remodeling loan program, making public health a priority through creating a community program, and working to become a Green Step City and developing a citywide sustainability report. The main goals of the city's programs are to increase existing residential housing market value, sales price, sustainability, and health factors, and to create a desirable place to live by incorporating value, quality of life, good health, education, and child development, and public-private partnerships with community support. More program support, outreach funding, and educational brochures will yield better results. Further, options for greater coordination between public health researchers and government agencies may benefit the residents in the execution of city programs and tracking of benefits. Overall, involvement with this project allows for sharing between practitioners, policymakers, and homeowners who can influence a proliferation of green projects and service industries [17, 18].

CONCLUSION

The impact of housing quality on public health is profound, particularly for vulnerable populations. Substandard housing not only increases the risk of physical health problems such as respiratory illnesses and cardiovascular diseases but also contributes to mental health challenges and social isolation. Addressing these issues requires an interdisciplinary approach that integrates urban planning, social policies, public health strategies, and community engagement. Policy interventions, including enforcing housing standards, providing financial incentives for landlords, and promoting healthier building practices, have shown promise in mitigating the adverse effects of poor housing. Ultimately, improving housing quality is essential for creating healthier, more equitable societies, and must be prioritized as part of a broader public health agenda.

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CITE AS: Nyakairu Doreen G. (2024). The Impact of Housing Quality on Public Health. EURASIAN EXPERIMENT JOURNAL OF PUBLIC HEALTH, 5(3):39-42